This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09 659, 999

Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	x	Fcc	Fee	-	Total
	Sm./Lg.				Sm. Entity	Lg. Entity		
Basic Filing Fee	201/101						-	690
Total Claims >20	203/103	7 -20	-	,x			=	
Independent Claims >3	202/102	ر. ي	-	x				
Mult. Dep Claim Present	204/104						3	
Surcharge	205/105	•		-		-	•.	130
English Translation	139							
TOTAL FEE CALCULA	ATION			BES	> .			<u>\$20</u>
Fees due upon filing to	he application:			•	AVAII			
Total Filing Fees Due	= \$	\$2p	·		TAVAILAB	E COP		
Less Filing Fees Subn	nitted - \$		<u> </u>			. 🗲		
BALANCE DUE	= \$	820						
h. Vill	e 09/2	4/0						
Office of Initial Paten	t Examination							•

Figure 7

FORM OIPE-RAM-01 (Rev. 12/97)